

**Kentucky Office of Insurance**  
**Consumer Protection and Education Division**  
**P.O. Box 517, Frankfort, KY 40602-0517**  
**Toll-Free: 1-800-595-6053**  
**Consumer Protection: (502) 564-6034, Fax: (502) 564-6090**

## **Consumer Complaint Form**

**PLEASE NOTE:** In order to assist you, we need a detailed summary of the problem from your perspective, in addition to the information below. Attach more sheets as needed. Please type or print. Please attach copies of any documents related to your complaint. Do not send originals.

1. Your Name \_\_\_\_\_ Daytime Telephone \_\_\_\_\_

2. Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

3. Type of Insurance Involved (*please circle one*):

Auto      Homeowner's      Life      Health      Disability

Workers' Compensation      Commercial      Other, please specify \_\_\_\_\_

4. My complaint is against (*please circle all that apply*):

Insurance Company      Adjuster      Agent      Other

5. If you are filing a complaint on behalf of another person, what is your relationship to the policyholder/ insured? \_\_\_\_\_

6. The involved insurance company is associated with (*please circle one*):

Your policy

Someone else's policy

7. Information on **my** policy: (*complete any that apply*)

Insurance Company: \_\_\_\_\_

Policy Number: \_\_\_\_\_

Group Number: \_\_\_\_\_

ID Number: \_\_\_\_\_

Agent's Name: \_\_\_\_\_

Agent's Address: \_\_\_\_\_

8. Information on the **other person's** policy (complete any that apply):

Insured's Name: \_\_\_\_\_

Insurance Company: \_\_\_\_\_

Policy Number: \_\_\_\_\_

Group Number: \_\_\_\_\_

ID Number: \_\_\_\_\_

Adjuster's Name: \_\_\_\_\_

9. Are you represented by an attorney? Please circle one.

Yes

No

Today's Date: (MM/DD/YY) \_\_\_\_/\_\_\_\_/\_\_\_\_

Signature \_\_\_\_\_

Please use the space below to provide a detailed description of the problem from your point of view. Attach additional sheets if needed.

This image shows a full page of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page, providing a template for handwriting practice or general note-taking. There are no margins, text, or other markings on the page.